

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004673

FILED
Jan 06, 2009
Secretary of State

Entity Name: EARLY CHILDHOOD CENTER OF GREATER BOYNTON, INC.

Current Principal Place of Business:

10655 EL CLAIR RANCH ROAD
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

10655 EL CLAIR RANCH ROAD
BOYNTON BEACH, FL 33437

New Mailing Address:

FEI Number: 26-0338232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HCRM CORP.
2200 NW CORPORATE BLVD., SUITE 401
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CIMENT, SHOLOM
Address: 10655 EL CLAIR RANCH ROAD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD () Delete
Name: CIMENT, DINA
Address: 10655 EL CLAIR RANCH ROAD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: BUKEIT, CHANA
Address: 10655 EL CLAIR RANCH ROAD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: KORF, CHAYA BAILA
Address: 10655 EL CLAIR RANCH ROAD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: NAGEL, ZISSEL
Address: 10655 EL CLAIR RANCH ROAD
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RABBI SHOLOM CIMENT

PSD

01/06/2009

Electronic Signature of Signing Officer or Director

Date